Attachment 4.35-H Revision: HCFA-PM-95-4 (HSQB)

JUNE 1995

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: _	FLORIDA	·
ELIGIB	ILITY CONDITIONS AND REQUIREMENTS	
Enforcement	of Compliance for Nursing Faciliti	les

Additional Remedies: Describe the criteria (as required at \$1919(h)(2)(A)) for applying the additional remedy. Include the enforcement category in which the remedy will be imposed (i.e., category 1, category 2, or category 3 as described at 42 CFR 488.408).

TN No. Supersedes TN No. NEW

Approval Date: 7-30-96